CLASS E AMENDMENT FORM	
Mail or Fax a copy of this form to:	Need Assistance with completing the Form?
Public Service Commission of South Carolina Clerk's Office 101 Executive Center Dr., Ste 100 Columbia, S.C. 29210	SC Office of Regulatory Staff Transportation Department
PHONE (803) 896-5100 FAX (803) 896-5199	PHONE: (803) 737-0800
DATE: January 21,2022	
have the following Certificate of Public Conveni	ience and Necessity:
Class E Household Goods #9750-A	Class E Hazardous Waste #
Please consider this as my request for the follow	ving amendment(s) to my Certificate:
Name Change	
(Current Name)	(Current DBA, if Applicable)
o:	
(New Name)	(New DBA, if Applicable)
Scope of Authority	
(Current Scope)	(New Scope)
and a formal hearing before the Public Service Commi requires additional justification and will require the pro	for household goods movers require the filing of a full applic ission. Any request to expand beyond three contiguous consesentation of a shipper witness(s) at the hearing before the etc. Attach any appropriate documentation)
Noving with Moxie, LLC	All My Sons Moving & Storage of Hilton Head
(Name)	(DBA if applicable)
400 Old Mill Road	Carrollton, TX 75007
(Street and/or Mailing Address)	(City, State, Zip Code)
(Signature)	(Title) Owner, President, etc.
843) 722-8301	(Tide) Strict, Fredition, etc.
(Telephone Number)	

102 Bluffton Road

Bluffton, SC 29910

ORS Revised 8-20-15